

As you know, the demands on the medical profession are unbelievably great and the number of doctors entering the military service very large. Since Pearl Harbor the quotas have been increasingly large, thus the number of men to be examined each month is in proportion. Under the circumstances it is impossible for the examining physicians of Selective Service to carry out the complete physical examination on all registrants.

Medical Circular No. 3 sets forth the reasons for the adoption of the system employed; it also covers the Selective Service Regulations and the List of Manifestly Disqualifying Defects, Deficiencies, Disorders and Diseases.

Selective Service is much impressed with the devotion and the patriotism of its examining physicians and dentists. As you no doubt know these professional men in Selective Service are making the preliminary examination of registrants who are to be inducted into all branches of the military service. This represents a national service of great magnitude and importance.

Publication of this circular, or portions thereof, together with an editorial on the value of the service and appreciation of the work of the medical profession, might be very worthwhile.

For the Director,
(Signed) L. G. ROWNTREE,
(Colonel, Med.-Res.)
Chief, Medical Division.

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Medical Profession is Happy at This Recognition.—CALIFORNIA AND WESTERN MEDICINE, happy to comply with Colonel Rowntree's suggestion, calls to the attention of members of the California Medical Association the importance of Medical Circular No. 3, and reciprocates at the same time the appreciation of the California Medical Association for the kindly expressions of the Federal Departments—headed by General Hershey and Colonel Rowntree,—for their statements concerning the services rendered by the Medical Advisory Boards and Examining Physicians of Selective Service; the editor taking the liberty to italicize those portions of the communications.

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Anent the subject of appreciation for services rendered by members of the medical profession, in both civilian and military activities, before and since the beginning of World War II, the attention of readers is once more directed to a series of items taken from the editorial columns of California newspapers, concerning the work of physicians, in which kindly and understanding presentations appear. For such, in this current issue, see page 255.

It is gratifying to learn that, in quarters where good opinion is of most value, the generous services so constantly given by members of the medical profession, are being recognized.

SURVEY OF C.P.S. MEDICAL SERVICE AND HOSPITALIZATION PLANS IS NOW BEING MADE IN CALIFORNIA

CALIFORNIA AND WESTERN MEDICINE, in its March issue, on page 130, under Item 12 of the minutes of the C.M.A. Executive Committee meeting of February 7, 1943, presented a discussion relative to the employment of Mr. John Mannix of Michigan Medical Service, and in accordance with the action taken, he will begin his survey work in April. Mr. Mannix has also been given a place on the annual session program. Reference is made thereto, to remind members of the Association that the survey will be under way before the Annual Session convenes on May 2nd.

In connection with the above, mention may be made of a resolution adopted at the recent meeting of the Association of California Hospitals, in which coöperation for closer relationship between that organization and the California Medical Association—in furtherance of medical service and hospitalization plans of mutual interest—is emphasized.

It is heartening to know that the constituted authorities of the hospitals of California are working in harmonious coöperation with Organized Medicine. In days such as the present, there is increasing need for that kind of mutual and kindly approach and endeavor.

HOW SACRAMENTO DRUGGISTS PUBLICIZED PRESENT-DAY MEDICAL NEEDS

Coöperation Between Sacramento Druggists and Physicians.—The *Sacramento Bee*, of February 17th, printed a half-page announcement, paid for by some 27 druggists, to each of whom was assigned two inches of space for name, address, and telephone number. Above the names there was a 7 by 10 inch illuminated display, in which appeared the information below, concluding with a line in neat capital letters, "This Appeal Sponsored by the Following Sacramento Druggists":

Mention is made of this advertisement because the druggists initiated the plan, in an effort to educate the citizens of Sacramento concerning their obligations to physicians in these somewhat disturbed times. The example set by the Sacramento druggists may suggest similar procedures in other communities.

Text of the announcement, which was modified from an item which had previously appeared in CALIFORNIA AND WESTERN MEDICINE, follows:

Rationed Gas, Rationed Tires, Rationed Doctors!
DON'T

SABOTAGE

YOUR DOCTOR'S TIME

Save Your Health and Your Doctor's Time

A large proportion of Sacramento's physicians have entered military service. Many more are preparing to go. Yet these "home front" physicians

are being required to carry a greatly increasing burden of work.

You and your family can help both to lighten this burden and to make sure that everyone will get the utmost benefit and safety from the limited medical service that will be available. Here's how:

1. Instead of asking the doctor to come to your home, go to his office when you can.

2. If a house visit is necessary, call the doctor before 8:30 in the morning or before 12:30 at noon, so he can plan his house calls efficiently.

3. Don't neglect to inform your doctor of the early signs of sickness. A timely visit to your doctor may prevent serious illness, numerous house calls—even hospitalization.

4. Be patient with your doctor if you have to wait in his office, or if he does not respond at once to your call. Remember that he is caring for many more patients than formerly, and he has only twenty-four hours in his day.

You and your neighbors on the "home front" won't suffer from lack of adequate medical care if we will all help the doctors carry their burden of extra service.

LANGLEY PORTER CLINIC, NEUROPSYCHIATRIC AND OTHER HOSPITALS

Deserved Honor.—Friends of Langley Porter, M. D., who served so many years as teacher and dean of the Medical School of the University of California, partook of the pride that was his due when the Neuropsychiatric Hospital, erected on the Medical Center grounds in San Francisco, was dedicated and given the name, Langley Porter Clinic. This new hospital and out-patient department will be in position to render excellent service to the people of the State.

It may be in order to offer the comment that it is the hope of physicians of California that the administrative officers of the Neuropsychiatric and other public hospitals will always keep in mind the desirability of not instituting methods of admittance and stay, that may be harmful to the interests of private medical practice, or to many other hospitals that are not supported by taxation, and which, for many years, have been rendering excellent service to the people of the State.

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An Unusual Request from Federal Authorities.—At the time the above was written, on March 27th, the press in San Francisco gave publicity to a news item in which it was stated that the Federal "Office of Defense, Health and Welfare Services" was practically demanding that hospitals in San Francisco County,—by State law instituted and supported by taxation for the care of indigent citizens—be opened to pay-patients of the general public. (For items referred to, see in this issue, on pages 236 and 245.)

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Concerning Projected Hospitals for the U. S. Public Health Service.—Information has also been received that Washington authorities are

planning for hospital structures of permanent nature, to be erected in Pacific Slope States, the administration of which is to be under the auspices of the U. S. Department of Public Health.

The issues involved in the above are important to physicians, especially with reference to medical practice in the future. The subject is of sufficient moment to be worthy of consideration by the C.M.A. House of Delegates, when it convenes in annual session at Los Angeles, on May 2, 1943.

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Medical Service as Proposed by the National Resources Planning Board.—At that time, also, the implications involved in the medical service proposals put forth in the "National Resources Planning Board," as submitted to Congress in President Roosevelt's message of March 10, 1943, may be worthy of attention.

Members of the C.M.A. House of Delegates, who have been studying these propositions, may wish to submit resolutions thereon, in order to facilitate further discussion. The time to consider such matters to best advantage, is in the beginning, not later.

INVALID DIETS AND FOOD RATIONING

A recent letter received from the "Food Distribution Administration" of the United States Department of Agriculture and signed by Russell M. Wilder, M. D., Chief of the Civilian Food Requirements Branch, calls attention to the rules concerned with diets for invalids. It is important that physicians and patients should know what are the procedures to be followed, in order to secure rationed foods in amounts or kind over and above the amounts available for other citizens.* The notice which follows gives such information:

(COPY)

INVALID DIETS AND FOOD RATIONING

Of interest to all who are concerned with diets for invalids is Ration Order 13, issued by the Office of Price Administration under date of February 9, 1943. This order covers all canned, dried, and frozen fruits and vegetables. Article II, Section 2.5 of the order reads as follows:

"Consumers who need more processed foods because of illness may apply for more points. (a) Any consumer whose health requires that he have more processed foods than he can get with War Ration Book Two, may apply for additional points. The application must be made, on OPA Form R-315, by the consumer himself or by someone acting for him, and may be made in person or by mail. The application can be made only to the board for the place where the consumer lives. He must submit with his application a written statement of a licensed or registered physician or surgeon, showing why he must have more processed foods, the amounts and types he needs during the next two months, and why he cannot use unrationed foods instead.

(b) If the board finds that his health depends upon his getting more processed foods, and that he cannot

* Should difficulties arise in securing local board sanctions for special diets, it is requested that C.M.A. members inform the editor of CALIFORNIA AND WESTERN MEDICINE.